

Pediatrics Milestones Assessment Collaborative PMAC

APPD Fall Meeting Update
September 27, 2017

PMAC Mission

To uphold the public trust by creating a unified, longitudinal approach to assessment of Pediatricians that:

- verifies continued competence beyond just medical knowledge*
- drives continuous performance improvement*
- facilitates lifelong learning, and*
- recognizes and guides both personal and professional growth*



PMAC Candidate Inferences

Decision Description	MS-III to MSIV	PGY-1	PGY-2	PGY-3
Readiness to serve as an intern	[]			
Readiness to care for patients without the presence of an onsite supervisor*		[]		
Ready to supervise others in the care of patients, without the presence of an onsite supervisor			[]	
Competence in identifying areas of new learning for self, creating activities to address gaps	[]			[]
Competence in identifying areas for improvement in systems associated with practice			[]	[]
Ready to practice without supervision				[]

Time range anticipated for achievement

[]



APPD LEARN Sites Engaged in PMAC Data Collection 2011-present

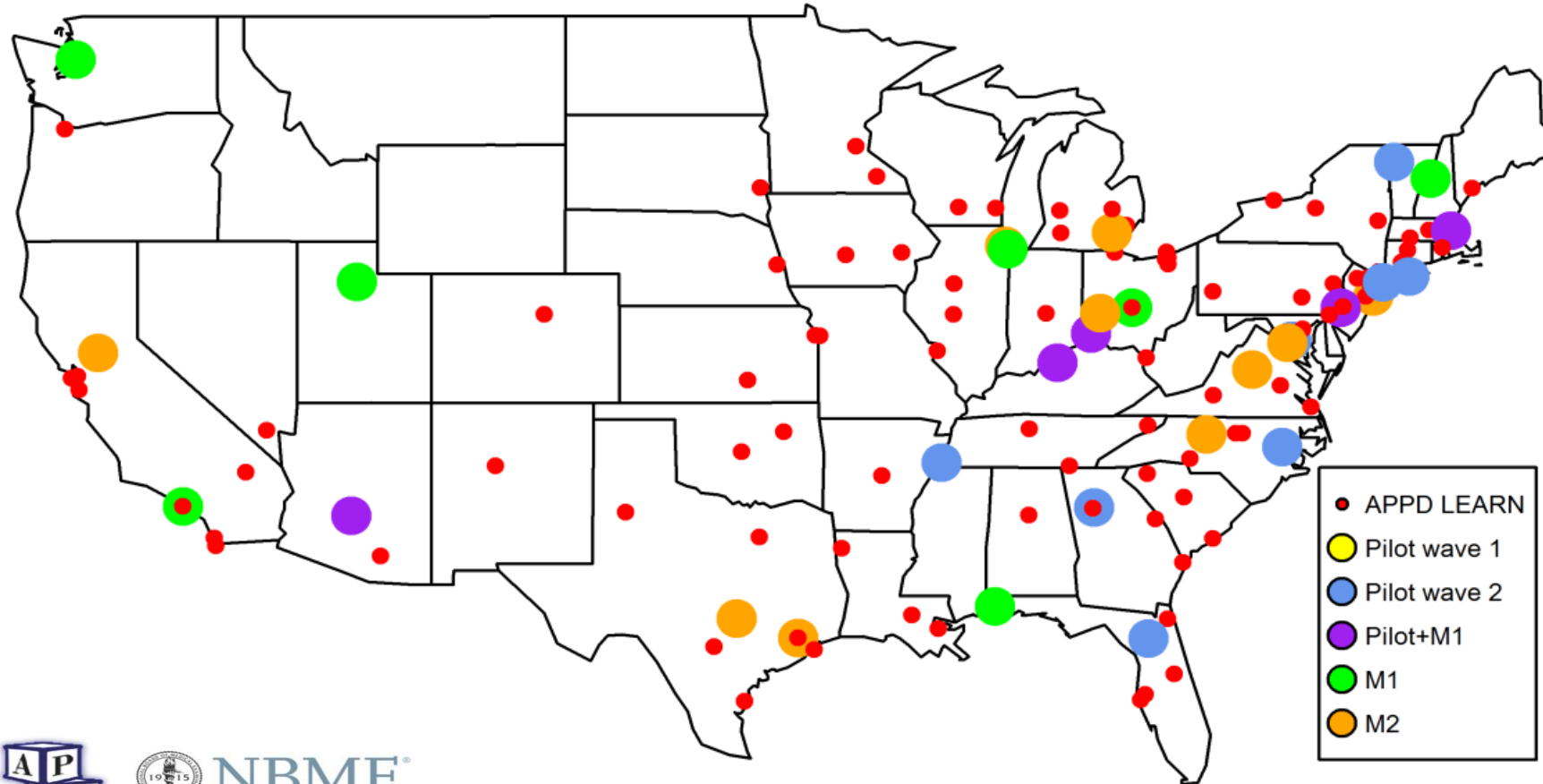


Table 1. Crosswalk between PMAC and EPAs and ACGME Reportable PMs

Pediatrics Milestones used for PMAC (ACGME numbering) Blue highlighting represents ACGME reportable PMs	Module 1 (M1) Green highlighting represents overlap of EPA and ACGME reportable PMs	Module 2 (M2) Green highlighting represents overlap of EPA and ACGME reportable PMs	Module 3 (M3) Green highlighting represents overlap of EPA and ACGME reportable PMs	Pediatrics Milestones used for PMAC (ACGME numbering) Yellow highlighting GP EPA competencies
PC-1 (PC-1)	PC-1	PC-1		PC-1 (PC-1)
PC-2 (PC-2)	PC-2	PC-2	PC-2	PC-2 (PC-2)
PC-3 (PC-3)	PC-3			PC-3 (PC-3)
PC-5		PC-5		PC-5
PC-6 (PC-4)			PC-6	PC-6 (PC-4)
PC-7 (PC-5)	PC-7			PC-7 (PC-5)
PC-13			PC-13	PC-13
PBLI-1 (PBLI-1)	PBLI-1	PBLI-1		PBLI-1 (PBLI-1)
PBLI-5 (PBLI-5)		PBLI-5		PBLI-5 (PBLI-5)
PBLI-8			PBLI-8	PBLI-8
ICS-1	ICS-1	ICS-1		ICS-1
ICS-3	ICS-3		ICS-3	ICS-3
ICS-4	ICS-4	ICS-4	ICS-4	ICS-4
P1 (Prof)	P1 (professionalization)	P1		P1 (Prof)
P2 (Prof)			P2 (conduct)	P2 (Prof)
PPD-1 (Prof-4)	PPD-1	PPD-1	PPD-1	PPD-1 (Prof-4)
PPD-5 (Prof-5)	PPD-5	PPD-5	PPD-5	PPD-5 (Prof-5)
PPD-6			PPD-6	PPD-6
PPD-8 (Prof-6)	PPD-8			PPD-8 (Prof-6)
SBP-1			SBP-1	SBP-1
SBP-5 (SBP-3)			SBP-5	SBP-5 (SBP-3)
	12 competencies used in PMAC M1	10 competencies are used in PMAC M2	11 competencies	
	9 of which are ACGME reportable	7 of which are ACGME reportable	4 of which are ACGME reportable	
	The same 9 are represented in the GP EPAs	6 of the 7 ACGME reportable PMs are represented in the GP EPAs	The same 4 are represented in the GP EPAs	

Module 2 Outcomes

	Count
Learners	258
Programs	10
Data collection period (months)	11
Multi-source Feedback Instruments	1538
Structured Clinical Observation Instruments	1053
SCO-Rounds	817
SCO-History and Physical Exam	236



Executive Summary of M2 Analysis

Psychometrics – Generalizability Analysis

Instrument	Number of Instruments	Generalizability Coefficient
Resident MSF	6	.80
Faculty MSF	6	.75
Nurse MSF	6	.86



Executive Summary of M2 Analysis

Observer Feedback

- For both Multisource Feedback and Structured Clinical Observation instruments, over 80% of respondents thought that the instruments
 - _ Were easy to use
 - _ Provided valuable information about strengths and weaknesses



Executive Summary of M2 Analysis

Learner Feedback

- SCO
 - 90% felt that the SCO helped them to identify areas of strength and weakness
 - 75% thought that the SCO provided specific recommendations that could help improve their performance
- Feedback Report
 - 78% thought that the report helped them identify strengths and weaknesses
 - Nearly 80% thought that the information was independently useful (in absence of a feedback session)



Module 3 – Readiness to serve as a supervisor

- Inpatient and outpatient settings:
 - Emergency Department and Acute Care Clinics
 - Inpatient General Pediatrics, sub-specialty inpatient wards, Neonatal ICU, Normal Nursery
 - Continuity of Care Clinic and/or Ambulatory, Non-acute Care Clinic
- MSF instruments for each setting for multiple roles
- Site recruitment started
- 6-9 programs to be enrolled for Phase 1 data collection
- Anticipated M3 data collection to begin mid-October or early November with plan to enroll programs in waves



Module 3

- M1 and M2 instruments offered to programs beginning 1.5 months after the start of M3 data collection
- Aggregate reports:
 - Quarterly feedback reports for mentors and advisors
 - Clinical Competency Committee reports
- MOC credit, scholarship opportunities, other incentives offered



Focus group meetings

- 5pm today in Studio B
 - Gathering of site leads interested in PMAC Module 3
- 7:45am tomorrow in Studio B
 - Focus group to discuss mentor/advisor quarterly reports



Ask us about PMAC!!!

Participation will improve the content and overall utility of the assessment, reports and feedback process

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